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ABSTRACT

The author describes a Caribbean project to pool professional resources for an international collaboration in the training of personnel for handicapped children. It is reported that the Institute was developed as a technical and professional arm of the Caribbean Association on Mental Retardation and that it functions as an itinerant, evolving, structure. The Institute is noted to constitute an alternative to meet the needs of trained personnel in small, developing countries of diverse cultures and languages which are geographically close and have common needs. (Author/SBH)

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CARIBBEAN ASSOCIATION ON MENTAL RETARDATION
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ABSTRACT

A NEW ALTERNATIVE FOR THE TRAINING OF PERSONNEL FOR HANDICAPPED CHILDREN

The author describes a project carried on in the countries of the Caribbean region to pool professional resources for an international collaboration in the training of personnel for handicapped children. The job is done through a Caribbean institue on Mental Retardation sponsored by the Caribbean Association on Mental Retardation. The Institute was developed as a technical and professional arm of the Association and functions as an itinerant, evolving, structure. It constitutes a new alternative to meet the needs of trained personnel in small developing countries of diverse cultures and languages but geographically close and with common needs.

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A NEW ALTERNATIVE FOR THE TRAINING OF PERSONNEL FOR HANDICAPPED CHILDREN

Paper presented by Prof. Delia E. Lugo at the First World Congress on Special Education of the Council for Exceptional Children, Stirling, Scotland. June 28th., 1978

Introduction

It is not always possible or convenient to use the same strategies to deal with common problems. Needs and problems might be quite similar, but the places in which they arise and the resources available to deal with them can make a big difference.

This is the case of the dilemma of mental retardation and other handicapping conditions encountered by developing countries as opposed to the way they are dealt with by the more developed nations.

Because of their power, their richness, and their knowledge, we look to the most advanced nations as leaders in all fields. Mental retardation and developmental disabilities are no exception. And this is good; it has to be so. We learn from the masters. But we also learn by ourselves. In fact, the masters, who have discovered and acquired knowledge, can only facilitate the acquisition of this knowledge by others. Everyone learns by himself. Learning is personal and individual. It becomes collective to the extent to which a larger number of individuals learn.

Countries can learn from other countries because people can learn from other people, but each one learns by himself.

When there has been real knowledge, action takes place. And this action originates, promotes, further learning. This is why activities like this World Congress are useful. It is expected that the exchange of ideas can result into action for

the benefit of the handicapped. No wonder this Congress is held on "future education".

When we turn ideas into action we start learning from experience. Then we discover new knowledge. We discover that strategies that have proven successful in many places do not necessarily produce the same results in other places. We discover that at least we need to modify them to make them applicable to the new situation. We discover that there are some pre-requisites that need to be fulfilled beforehand. We also discover that there are strong cultural influences that affect the efficiency of the strategies used. In brief, when we face the problem of mental retardation and other handicapping conditions in our own reality, when we face the child, his family, and the society in which he lives, we find that there are no prescribed recipes that work successfully. We have to create. We have to learn again by ourselves. Our previous learning, our professional training, gives us the set we need to continue learning by ourselves; to continue learning from experience. Training gives us freedom and further capacity to learn.

Learning is continuous. We start our training learning, we end our experience learning. And it does not need to be in the same way or through the same strategy.

Common practice in the training of personnel

Most of the training of personnel in special education is done at the college level in about the same way. Universities' training programs are very much alike. There are courses and field work. Courses provide a basic body of knowledge. Field work provides the opportunity to apply it. Yet, the future special teacher is trained in a relatively artificial setting. Even though the universities try their very best to train in the most real situation, it is still an academic training. In service education is always needed to follow up.

Universities' training programs are good for the areas in which they operate. They have been developed carefully, scientifically. They are well staffed. They are evaluated and modified continuously. They meet the standards. Even with some limitations, they serve their purpose. But this does not mean that they are the only way to train or that they can be developed in every country as well.

Developing countries look at these programs with scepticism. And this is natural. In fact, this is the way to look at them. What kind of professional do they prepare? Is the trained special teacher prepared to deal with the problems he or she will meet in a poor, rural, less developed environment? On the other hand, can a small, developing, agricultural country afford a training program such as those developed in larger, more advanced, industrial countries? Are the human, physical and financial resources the same? Is the language and the culture the same? Is the educational philosophy the same?

A new strategy to help the handicapped

In the Caribbean region we have met this conflict. We have found many difficulties, but we have also discovered many possibilities and some alternatives. We have developed a strategy to help the handicapped and this is what I would like to share with you on this occasion.

The Caribbean countries are very different among themselves: in language, in culture, in resources. It is amazing to observe four different main cultures and languages existing in such a relatively small area. This region is a most diverse, beautiful and interesting area. It has its own share of mental retardation and developmental disabilities and great limitations to deal with them. Yet, the Caribbean people, in spite of their differences, are accepting the challenge and have joined to do something for their handicapped children. Untapped resources of va-

rious countries, international bodies, and individuals have been mobilized and pooled to create a new strategy to help the handicapped.

It all started from the interest of a few persons; a desire to communicate, to share their concerns about the handicapped, especially the mentally retarded. These people, volunteers, parents and professionals from all fields, got together and shared some ideas. The enthusiasm created in this first meeting in 1970 (I Caribbean Congress on Mental Retardation held in Jamaica) was such, that it gave birth to a Caribbean Association on Mental Retardation, an international body that was officially organized on October 12th., 1972 during the II Caribbean Congress on Mental Retardation held in Puerto Rico. A new communication system was established among the countries of the Caribbean region. And communication always produces results. Many people were involved and interested in working for the retarded. New parents groups were organized and new services were established. Financial assistance was obtained from agencies and other organizations in the region and in the United States. Parents organizations have a vital participation in the project working jointly with professionals and governments, but on their own.

The main problem in most of the countries was the lack of trained personnel to operate the new services that were being established. There were no training facilities in most of the countries and apparently no possibilities for developing this type of enterprise.

But someone [1/] proposed the idea of creating a Caribbean Institute on Mental Retardation and Developmental Disabilities to tackle this problem. Therefore, in the third meeting of the

1/ It was Dr. Allan G. Roeher, Director of the Canadian Institute on Mental Retardation, who proposed this idea.

CAMR (III Caribbean Congress on Mental Retardation held in Barbados in 1974) a resolution was taken: to study the feasibility of establishing an Institute that would serve as a technical and professional arm to facilitate the maximum possible development of the mentally retarded and other handicapped children in the region.

With the financial assistance of the Canadian Association on Mental retardation, the Institute became a reality. It commenced to operate in Kingston, Jamaica, on January 1st., 1976 and reported its first fruits at the fourth meeting of the Caribbean Association on Mental Retardation (IV Caribbean Congress on Mental Retardation held in the Dominican Republic in 1976).

We are grateful that the Canadian Association on Mental Retardation shared our concerns and envisioned the possibility of helping other disadvantaged countries through this Institute. It reveals unselfish dedication to the cause of mental retardation.

The Institute has six main objectives:

1. To provide, identify and facilitate professional leadership and expertise in the field of mental retardation and developmental disabilities.
2. To identify and pool local resources, materials and information to be made available to agencies and organizations in the region.
3. To provide short term training courses and seminars in areas of priority needs and upgrade the skills and knowledge of local professionals.
4. To assist in the training of professional groups by providing expertise in this field to ongoing programs.
5. To facilitate the channeling of funds and expertise from international organizations to the region.
6. To stimulate the development of operational research, especially innovative service programs, epidemiology, behavioral and other cultural programs peculiar to the region.

The Institute has given priority to the training of personnel in special education while attending to public education, government consultation, and international communication. It has sponsored a series of short term, intensive seminars for teachers and other personnel that have been offered in place; right in the teaching setting, facing reality within the community.

There are twenty eight (28) countries involved in this project. The reports of the activities of the Institute and the CAMR are evidence of the potential that exists even in the less developed countries and it's positive utilization for the benefit of the handicapped. They are proof of the capacity to learn and do that all countries have as small and limited as they can be. They are a confirmation of the power of common people; a force that often remains dormant for lack of communication and leadership.

The CAMR and the CIMR constitute a new strategy to help people help themselves. It is not a static strategy, though. It is a developing concept, a product of learning on the go.

After two years of successful functioning of the Institute under the leadership of it's Director, Dr. Marigold Thorburn, and operated from a small office in Kingston, Jamaica, a new step has been taken to expand the field of action and to involve more people and reach more handicapped children. Just recently it has been reorganized to function under a Program Council that will be composed of four members representing and responsible for countries of four different cultures and languages (English, Spanish, Dutch, French) and four disciplines (Medicine, Education, Social Work, Rehabilitation). It's main office will be moved to Puerto Rico.

This new alternative for the training of personnel views the Institute as an itinerant body, moving to the places where the problems are, pooling resources, and serving according to the particular needs of each country. It moves away from a fixed program, or a fixed structure. The CIMR is an evolving concept.

We still have a long way to go but we are as optimistic as always because we know there is potential and we are dealing with highly motivated people. Also, because we are involving each community to solve its own problems. Because we are creating public awareness and responsibility. Because we are learning from the experience of the masters as well as from our own experience. But mainly, because we are not just imitating; we are creating.

I only hope that this World Congress can have an impact in the countries of the world as great as the First Caribbean Congress on Mental Retardation had in the countries of the Caribbean Region.

About the author:

Delia E. Lugo is Professor of Special Education at the College of Education of the University of Puerto Rico. She obtained her graduate degrees from the University of Illinois. From 1972-74 Mrs. Lugo was Secretary Treasurer of the Caribbean Association on Mental Retardation; from 1974-78 acted as Executive Assistant and Consultant of the Association; and in March, 1978 was appointed Chairperson of the Program Council of the Caribbean Institute on Mental Retardation.